

October 6, 2011

Dear Sir/Madam,

I am convinced that to change Michigan's no fault auto insurance would be a disaster. Providing medical care for someone seriously injured in an auto accident is a very expensive proposition. If the no-fault law is changed and coverage is decreased, I believe that the following will happen, none of them good.

- 1. Individual coverage will be quickly exhausted and injured people will be pushed into the Medicaid system.**
- 2. This will cause additional stress on an already precariously funded Medicaid system.**
- 3. Some people will simply fall through the cracks for want of coverage.**
- 4. There will not be any lowering of premiums, because to get the Personal Injury Protection coverage, there will be unreasonable caps. This will place the burden on healthcare institutions to take on additional uncompensated debt. Therefore, there will not truly be a lowering of premiums and increased percentage of drivers with insurance. Those that drive without insurance will continue to do so.**
- 5. There is likely to be an increase in the number of lawsuits. This will help no one and will further strain the court system.**
- 6. Many post-trauma care facilities do not accept Medicaid and in turn these patients will not receive the appropriate care necessary post-discharge to help return them back to the highest level of functioning.**

The proposed auto no-fault legislation does not benefit Michigan residents. There is claim that this piece of legislation will cost residents less; however, a very important piece is left out, in order to get the coverage they once had, each resident will have to purchase more insurance. There will be fewer physicians who are willing to care for the injured, due to the large amount of time and resources utilized to care for the severely injured. Under this legislation, once exhausted on coverage, working class residents without health care insurance will be pushed into the Medicaid system. I am sure that you are well aware that Medicaid reimburses health care providers at a rate substantially less than costs that are incurred. Institutions that care for the injured will be required to bear a substantial increase of uncompensated care, which will eventually lead to sacrificing jobs and the ability for these trauma institutions to deliver the highest quality of care to the injured.

In conclusion, please vote no on House Bill 4936. Thank you for your consideration.

Sincerely,
Melanie Mata
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